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United States Patent and Trademark Office COMMISSIONER FOR PATENTS c/o Mark S. Graham, Primary Examiner P.O. Box 1450 Alexandria, VA 22213-1450

## To Whom It May Concern:

I have enclosed a revised list of Claims for your review. I have specifically paid close attention to the points mentioned by Ms. Edna Payton, Legal Instruments Examiner (LIE), via our phone conversations and have conducted them accordingly:

1) I would like to arrange payment via credit card for presentation of excess claims (37 CFR 1.16(b) & (c)). According to Ms. Edna Payton, my balance is \$300 plus \$225 for late fees, which totals \$525. I would like to pay this amount via MasterCard. My credit card information is listed below:

Antonio D. Marshall

CCN: 5424 1808 2380 5731

Exp: 10/31/05 Type: MasterCard

2) I have attached the claims. Claims 20-24 has "(Cancel)" listed by each number.

Thank you again for processing my patent application, and I hope the revised Claims meet your approval. Please contact me if there is a need for a revision of the Claims.

Sincerely,

Tony Marshall, Applicant Patent App.# 10/722,768

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